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CANADA	•		Lindsay: (SI) W May 13	Jol VS	hnson, la	(Signature) (Date)		
APPLICATION NO. FILING DATE			FIRST NAMED INVE		STOR ATTO		RNEY DOCKET NO.	CONFIRMATION NO.
09/756,680	01/10/2001		Richard Cam		1635-224			4581
TITLE OF INVENTION: S		E FOR CELL AN	D/OR I				1033-224	4301
APPLN, TYPE	SMALL ENTITY	· ISSUE FEE D	UE .	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510		\$300	\$0		\$1810	06/16/2010
EXAMINER ART UNIT				CLASS-SUBCLASS				
WONG, BLANCHE 2476				370-412000	3			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed,				
(A) NAME OF ASSIGN PMC - SILM	ssignee n is NO	data will appear on the programmer of the progra	TENT (print or type) I appear on the patent. If an assignce is identified below, the document has been filed for itute for filing an assignment. SIDENCE: (CITY and STATE OR COUNTRY) CANADA the patent): Individual Corporation or other private group entity Government					
				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number				
5. Change in Entity Status a. Applicant claims S NOTE: The Issue Fee and P	MALL ENTITY status	-See 37 CFR 1.2		b. Applicant is no lon	ger claiming SMAL	L ENT	ITY status. See 37 CE	R 1.27(g)(2). e assignee or other party in
Authorized Signature	and of the Office State	lemark	1 from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in Office. Date Way 13-2010 Pagietration No. 47947					
Typed or printed name \(\) This collection of information application. Confidentiality	n is required by 37 CF	R 1.311. The info	ormation	n is required to obtain or r	Registration No retain a benefit by th		which is to file (and	by the USPTO to process)

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